

Cass

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup>, Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073

Reset Form

IA ETHICS AND  
CAMPAIGN DISCLOSURE BD.  
EMAIL  
2009 OCT 28 AM 9:13

FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

COMMITTEE NAME (Must be same as on Statement of Organization)

Kathy Somers for City Council or Committee to elect Kathy Somers

IMPORTANT: Indicate by # type of committee you are reporting for: ☐  
( 1 )Statewide/Legislative/Judge Standing for Retention Candidate ( 2 )State PAC ( 3 )State Party  
( 4 )County Central Committee ( 5 )County Candidate ( 6 )City Candidate ( 7 )School Board or Other Political  
Subdivision Candidate ( 8 )County PAC ( 9 )City PAC ( 10 )School Board or Other Political Subdivision PAC ( 11 ) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name

Kathy Somers

Political Party (if applicable)

Republican

Office Sought

City Council, Ward 2

District (If Senate or House)

<b>FORM DR-2</b> (Rev. 07/2007)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. #	_____
Logged In	_____
Scanned	_____
Computer	_____
Audited	_____

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

SIGNATURE OF PERSON FILING REPORT

TELEPHONE

DATE SIGNED

I AM FILING A October 29, 2009 REPORT FOR (1) ELECTION //(2) NON-ELECTION YEAR.  
(report date) Indicate by # ☒

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election <u>11-3-09</u>
County & Local Committees, enter County in which Election is held <u>CASS</u>

**STATEMENT OF CASH ON HAND**

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.) .....\$

0.00

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below) .....

Schedule F: Loans Received total (Attach Schedule F) .....

Schedule H: Total Sales of Campaign Property (Attach Schedule H) .....

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$

980.00

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below) .....

Schedule F: Loan Repayments total (Attach Schedule F) .....

808.37

CASH ON HAND at the end of this reporting period (If final report balance must be zero) .....\$

171.63

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D).....\$

\*\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E).....\$

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F).....\$

CONSULTANT BREAKDOWN (Schedule G Attached?)

\_\_\_ YES \_\_\_ NO

**CANDIDATE COMMITTEES ONLY:**

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

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# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONEY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Kathy Somers for City Council

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
9/15/2009	ID# CK#	Don Sonntag 58979 Marne Rd., Atlantic, IA 50022		\$100.00	<input type="checkbox"/>
9/15/2009	ID# CK#	Kathy Somers 106 W 9th St., Atlantic, IA 50022		\$0.00	<input type="checkbox"/>
9/18/2009	ID# CK#	Keith Harlan 300 W 22nd St., Atlantic, IA 50022		\$100.00	<input type="checkbox"/>
10/5/2009	ID# CK#	Verna Esbeck 67522 Alpine Ln., Atlantic, IA 50022		\$25.00	<input type="checkbox"/>
10/5/2009	ID# CK#	John Krogman 902 Chestnut St., Atlantic, IA 50022		\$25.00	<input type="checkbox"/>
10/6/2009	ID# CK#	Hal Gronewold 101 W 22nd St., Atlantic, IA 50022		\$100.00	<input type="checkbox"/>
10/6/2009	ID# CK#	Joan Underwood 1315 Poplar St., Atlantic, IA 50022		\$25.00	<input type="checkbox"/>
10/6/2009	ID# CK#	Duane McFadden 57686 Eastland, Marne, IA 51552		\$50.00	<input type="checkbox"/>
10/7/2009	ID# CK#	Chuck Kinen 2409 Chestnut St., Atlantic, IA 50022		\$25.00	<input type="checkbox"/>
10/16/2009	ID# CK#	Rich Perry 1105 Roosevelt Dr., Atlantic, IA 50022		\$20.00	<input type="checkbox"/>
SUB-TOTAL				\$ 520.00	
TOTAL (if last page of this schedule)				\$	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule A)

For Instructions, See Back of Form

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# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONEY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Kathy Somers for City Council

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
10/16/2009	ID# CK#	Bev Hall 905 W Mahogany Dr., Atlantic, IA 50022		\$25.00	<input type="checkbox"/>
10/16/2009	ID# CK#	Keith Swanson 60313 670th St., Atlantic, IA 50022		\$50.00	<input type="checkbox"/>
10/16/2009	ID# CK#	Helen Wohlenhaus 1110 Roosevelt Dr., Atlantic, IA 50022		\$10.00	<input type="checkbox"/>
10/18/2009	ID# CK#	Don Sonntag 58979 Marne Rd., Atlantic, IA 50022		\$100.00	<input type="checkbox"/>
10/19/2009	ID# CK#	Haley Kickland 2805 Olive St., Atlantic, IA 50022		\$100.00	<input type="checkbox"/>
10/19/2009	ID# CK#	Sid Winchell 1003 E 10th St., Atlantic, IA 50022		\$50.00	<input type="checkbox"/>
10/19/2009	ID# CK#	Bob Camblin 903 Locust St., Atlantic, IA 50022		\$100.00	<input type="checkbox"/>
10/24/2009	ID# CK#	Alice Brown 613 Poplat St., Atlantic, IA 50022		\$25.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 460.00	
TOTAL (if last page of this schedule)				\$ 980.00	

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(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

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## EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Kathy Somers for City Council

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/29/09	ID# CK#93	Atlantic News Telegraph 410 Walnut St. Atlantic, IA 50022	Newspaper ads	\$ 150.00
10/20/09	ID# CK#94	J & J Custom Graphic Design 217 Walnut St. Atlantic, IA 50022	Yard signs	422.62
10/24/09	ID# CK# 95	Kathy Somers 106 W 9th St. Atlantic, IA 50022	Reimburse for: Voter list, ink, postage for fund raising & flyers, door-hanger paper, 3 people distribute door hangers	235.75
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#refund			
	ID# CK#			
SUB-TOTAL				\$ 808.37
TOTAL (if last page of this schedule)				\$ 808.37

### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(f).)

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(for Schedule B)